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Bib Data Sheet

CONFIRMATION NO. 6167

<b>SERIAL NUMBER</b> 10/052,106	<b>FILING DATE</b> 01/17/2002 <b>RULE</b>	<b>CLASS</b> 380	<b>GROUP ART UNIT</b> 3662	<b>ATTORNEY DOCKET NO.</b> 540-321	
<b>APPLICANTS</b> Robin E. O'Brien, Ringwood, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> <i>NONE</i> <i>NY</i> <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0101705.2 01/23/2001 <i>NY</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/21/2002</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> <i>[Initials]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 7	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> NIXON & VANDERHYE P.C. 8th Floor 1100 North Glebe Road Arlington, VA 22201-4714					
<b>TITLE</b> ATM cell handling					
<b>FILING FEE RECEIVED</b> 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		